

LAST NAME - FIRST NAME - MIDDLE INITIAL		CAPSN	GRADE	DATE ENTERED CAP	DATE OF BIRTH	SEX: <input type="checkbox"/> M <input type="checkbox"/> F
POSITION: <input type="checkbox"/> CADET <input type="checkbox"/> SENIOR		UNIT		DENOMINATION	NAME OF HOME CHURCH/SYNAGOGUE	
RESIDENCE ADDRESS (Number, street, city and state)		RESIDENCE PHONE NO.		NAME AND ADDRESS OF PASTOR/RABBI		
NEXT OF KIN		RELATIONSHIP				
ADDRESS OF NEXT OF KIN (Number, street, city, and state)		PHONE NUMBER				
BUSINESS (For seniors only)		BUSINESS PHONE NO.		ATTENDANCE <input type="checkbox"/> REGULAR <input type="checkbox"/> SELDOM <input type="checkbox"/> NONE		
SCHOOL (For cadets only)		GRADE		REMARKS/RELIGIOUS ACTIVITIES INVOLVED IN		
HOBBIES OR CLUBS						
MORAL LEADERSHIP COURSE COMPLETED <input type="checkbox"/> YES		DATE				
RATINGS (Check appropriate block(s))						
<input type="checkbox"/>	PILOT	<input type="checkbox"/>	DRILL TEAM			
<input type="checkbox"/>	OBSERVER	<input type="checkbox"/>	INTERNATIONAL CADET EXCHANGE			
<input type="checkbox"/>	RADIO OPERATOR	<input type="checkbox"/>	JET ORIENTATION COURSE			
<input type="checkbox"/>	CERTIFICATE OF PROFICIENCY	<input type="checkbox"/>	SPECIAL AWARD/OTHER (Use Remarks)			
				DATE OF INTERVIEW		

CAP FORM
FEB 82 48

Previous editions are obsolete

HQCAP(00-3634)10M

RELIGIOUS INTERVIEW GUIDE